United States Of America

Department of Transportation - Federal Abiation Administration

Supplemental Type Certificate

Project No. ST3917SC-A (KAW)

Number SA09060SC

This Certificate issued to

Texas Skyways, Inc. 308 Boerne Stage Airfield Boerne, TX 78006

certifies that the change in the type design for the following product with the limitations and conditions therefor as specified hereon meets the airworthiness requirements of Part 3 of the Civil Air Regulations.

Original Product - Type Certificate Number: ATCE

Make: Cessna

Model: 421, 421A

Description of Type Design Change: Install Teledyne Continental GTSIO-520-D engine modified under STC SE09058SC in accordance with Texas Skyways, Inc. Installation Procedures SK421A, dated 05/01/95, or later FAA approved revision.

Limitations and Conditions: Compatibility of this design change with previously approved modifications must be determined by the installer. A copy of this Certificate must be maintained as part of the permanent records for the modified aircraft.

This certificate and the supporting data which is the basis for approval shall remain in effect until surrendered, suspended, revoked or a termination date is otherwise established by the Administrator of the Federal Aviation Administration.

Date of application: May 24, 1995

Date of issuance: July 10, 1995

Date reissued:

Date amended:



By direction of the Administrator

A. J. Merrill

Manager, Special Certification Office

Southwest Region

(Title)

Any alteration of this certificate is punishable by a fine of not exceeding \$1,000, or imprisonment not exceeding 3 years, or both.

INSTRUCTIONS: The transfer endorsement below may be used to notify the appropriate FAA Regional Office of the transfer of the Supplemental Type Certificate.

The FAA will reissue the certificate in the name of the transferee and forward it to him.

TRANSFER ENDORSEMENT

Transfer the ownership o	of Supplemental Type Certificate Number
to (Name of transferee)	
(Address of transferee)	(Number and street)
	(City, State, and ZIP code)
from (Name of grantor)(1	Print or type)
(Address of grantor)	(Number & street)
Extent of Authority (if	(City, State, and ZIP code) licensing agreement):
Data of Warreford	
Date of Transfer:	× 1
Signature of grant	cor (In ink):